

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated. This certificate must be filed by the attending Physician or Midwife with each local Registrar within 5 days after birth.

PLACE OF BIRTH		ARIZONA STATE BOARD OF HEALTH	
County of <u>Apache</u>	BUREAU OF VITAL STATISTICS	2	State Index No. <u>751</u>
District of _____	ORIGINAL CERTIFICATE OF BIRTH		Co. Register No. <u>144</u>
Town of <u>Eagar</u>			Local Registrar's No. <u>21</u>
or _____			
City of _____	(No. _____ St; _____ Ward)		
FULL NAME OF CHILD <u>Marion Maxwell Lee</u>		Born	YES
If child is not named, make Supplemental Report on blank obtainable from local registrar.		Alive	NO
Sex of Child <u>boy</u>	Twin, Triplet or other <u>1</u>	and	Number in order of birth <u>1</u>
			Legitimate? <u>yes</u>
			Date of Birth <u>Sept 4</u> 191 <u>6</u>
			(Month) (Day) (Yr.)
Full Name <u>FATHER</u>	Full Maiden Name <u>MOTHER</u>		
<u>Marion Lee</u>	<u>Ella Maxwell</u>		
Residence <u>Nuturo</u>	Residence <u>Nuturo</u>		
Color or Race <u>white</u>	Color or Race <u>white</u>		
Age at last Birthday <u>2.3</u> (Years)	Age at last Birthday <u>20.20</u> (Years)		
Birthplace <u>Nuturo</u>	Birthplace <u>New Mexico</u>		
Occupation <u>Farming</u>	Occupation <u>Housekeeping</u>		
Number of child of this mother <u>2</u>	Number of children, of this mother, now living <u>1</u>	Were precautions taken against Ophthalmia neonatorum? <u>yes</u>	
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*			
I hereby certify that I attended the birth of above child; and that it occurred on <u>Sept 4</u> 191 <u>6</u> , at <u>9</u> A.M.			
{ *When there is no attending physician or midwife, then the householder should make this return.			
(Signature) <u>Archie Nelson</u>		(Attending physician, midwife, householder. *)	
Given or christian name added from a supplemental report _____ 191 <u>6</u>		Address <u>Eagar, Ariz.</u>	
435-904-543		E. J. L. L. L.	
COUNTY REGISTRAR.		LOCAL REGISTRAR.	
Filed <u>Sept 30</u> 191 <u>6</u>		A True Copy	
Filed <u>Oct 9</u> 191 <u>6</u>		J. J. Boulton	
		COUNTY REGISTRAR.	